

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 03/1/2014.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 134,730,989	-4.1%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify No

Brief description of filing (if filing follows rates of an advisory organization, specify organization) See Filing Memorandum;
(Adopt 1/1/14 Advisory Rates)

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

ACE AMERICAN INSURANCE COMPANY
Name of Company

John Fogleboch – WC Compliance Analyst
Official — Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 03/1/2014.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 286,273	-4.1%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify NoBrief description of filing (if filing follows rates of an advisory organization, specify organization) See Filing Memorandum:
(Adopt 1/1/14 Advisory Rates)

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

ACE FIRE UNDERWRITERS INSURANCE COMPANY

Name of Company

John Fogleboch – WC Compliance Analyst

Official — Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 03/1/2014.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 1,005,890	-4.1%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify NoBrief description of filing (if filing follows rates of an advisory organization, specify organization) See Filing Memorandum;
(Adopt 1/1/14 Advisory Rates)

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

ACE PROPERTY & CASUALTY INSURANCE COMPANY

Name of Company

John Fogleboch – WC Compliance Analyst

Official — Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 01/01/2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	1,116,715	-4.5
Line of Insurance		

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____
 Adopting Advisory Rates effective 01/01/2014

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

ACIG Insurance Company

Name of Company

Nancy Pfaffle - Insurance Operations Manager

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 3/1/2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	\$977,175	-1.20%
Line of Insurance		

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: Yes, we are adding class 8742
 to the surcharged list of Loss Cost Multipliers.

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting
 the NCCI loss costs IL-2013-03 effective March 1, 2014, and revising our Loss Cost Multipliers.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Addison Insurance Company

Name of Company

Allen R. Sorensen, VP - Corporate Underwriting

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$16,839	-5.8%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): NCCI advisory loss costs and rating values.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Allied Eastern Indemnity Company

Name of Company

Richard W. Irons - Product Manager

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01-01-2014 ~~4.9%~~

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	9,774,096	-4.9%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: _____

Pertains to industrial class codes _____

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

Filing to adopt NCCI loss costs effective 1/1/2014 _____

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

American Alternative Insurance Corporation

Name of Company

Michelle Freitag, Consulting Actuary

Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2014

(1)	(2)	(3)
<u>Coverage</u>	<u>Annual Premium Volume (Illinois)*</u>	<u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	2,396,629	-6.9%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

Adoption of NCCI advisory loss costs and rating values effective January 1, 2014

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

American Guarantee and Liability Insurance Company

Name of Company

Gary E. Shook, Vice President and Chief Pricing Actuary

Official – Title

Section 754. EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective January 1, 2014

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers' Compensation</u> <u>Line of Insurance</u>	<u>\$ 18,944,884</u>	<u>-7.6 % on our book of business</u>

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Adoption of 1/1/2014 NCCI Advisory Loss Costs with an
effective date of January 1, 2014 to be effective for all new and renewal policies on and after January 1, 2014.

• Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

American Interstate Insurance Company, NAIC #31895

Name of Company

Kathy Wells, Regulatory Manager, Regulatory Filings
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 01-01-2014 22%

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	133,005	-9.2%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

Pertains to industrial class codes

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Filing to adopt NCCI loss costs effective 1/1/2014

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

American Modern Home Insurance Company

Name of Company

Michelle Freitag, Consulting Actuary

Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	4,983,837	-9.3%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

Adoption of NCCI advisory loss costs and rating values effective January 1, 2014

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

American Zurich Insurance Company

Name of Company

Gary E. Shook, Vice President and Chief Pricing Actuary

Official – Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective January 1, 2014

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other 16.0 - Workers Compensation	\$12,751,887	-5.80%
	Line of Insurance		

Does Filing only apply to certain territory (territories) or certain
classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Adoption of NCCI's Workers Compensation

Loss Costs Revision

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Arch Insurance Company

Name of Company

Kevin Purcell, Vice President - IRC

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	1,644,764	- 4.5%

Line of Insurance

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): NCCI-Voluntary Market- Advisory Rates and Rating Values Adoption

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Badger Mutual Insurance Company

Name of Company

Terry Falls - Workers' Compensation Coordinator

Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 03/1/2014.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 357,962	-4.1%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify No

Brief description of filing (if filing follows rates of an advisory organization, specify organization) See Filing Memorandum;
(Adopt 1/1/14 Advisory Rates)

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

BANKERS STANDARD INSURANCE COMPANY
Name of Company

John Fogleboch – WC Compliance Analyst
Official — Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014 (new and renewal).

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	535,588	-6.1%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No- Applies to all WC Classes

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): _____

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Berkley National Insurance Company

Name of Company

Sharon Coyne - Regulatory Analyst

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014 (new and renewal).

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	322,934	-12.4%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No-Applies to all WC Classes

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): _____

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Berkley Regional Insurance Company

Name of Company

Sharon Coyne - Regulatory Analyst

Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	10807529	-5.8%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Berkshire Hathaway Homestate Insurance Company is adopting
the loss costs and miscellaneous values promulgated by NCCI and approved by the Illinois Department of
Insurance for policies incepting after 01/01/2014.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Berkshire Hathaway Homestate Insurance Company

Name of Company

Keith Engelbrecht, A.C.A.S. - Actuary

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 2/1/2014.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	2,411,076	0%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): _____

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Brotherhood Mutual Insurance Company

Name of Company

Larry Jackson, AVP Research & Development

Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)**FORM (RF-3)****SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision
effective 01/01/14 new and renewal.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$1,823,391	-4.5%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: NO

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Adopting NCCI Circular IL-2013-06

Illinois-Voluntary Market-Approval of Advisory Rates, Loss Costs, and Rating Values Effective January 1, 2014

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Capitol Indemnity Corporation

Name of Company

Amanda Mullen, Senior Product Analyst

Official – Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2014

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$25,000,000	-4.5%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify No

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

Adopting January 1, 2014 NCCI Voluntary rates and rating values with an effective date of January 1, 2014 without deviation.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Continental Indemnity Company
Name of Company

Joan Klucarich, Actuary
Official — Title

Illinois

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective

01-01-2014
(~~\$2,224,447~~)

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi Peril		
14. Crop Hail		
15. Workers Compensation	\$ 6,224,447	-3.41%
16. Other		

Does filing only apply to certain territory (territories) or certain classes? If so, specify

Brief description of filing (if filing follows rates of an advisory organization, specify organization)

NCCI

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Church Mutual Insurance Company

Name of Company

Lynn Reichelt - Director - Casualty Lines

Officer - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)**FORM (RF-3)****SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014.

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u>	4,476,562	0.0%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Rate Adjustment

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Federated Rural Electric Insurance Exchange

Name of Company

Chant Sent - Actuarial

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective January 1, 2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois) *</u>	(3) <u>Percent Change (+ or -) **</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	16,670,427	-6.2%
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of approved NCCI Circular IL-2013-06 Illinois-Voluntary Market-Advisory Rates, Loss

Costs, and Rating Values Effective January 1, 2014.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which
will result from application of new rates.

Federated Mutual Ins. Co.

Name of Company

Greg Bangs ACAS, MAAA – Assoc. Actuary

Official – Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective January 1, 2014

(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+ or -) **
1. Automobile Liability Private Passenger		
Commercial		
2. Automobile Physical Damage Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u> <u>Line of Insurance</u>	<u>2,724,775</u>	<u>-6.8%</u>

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

Adoption of approved NCCI Circular IL-2013-06 Illinois-Voluntary Market-Advisory Rates, Loss

Costs, and Rating Values Effective January 1, 2014.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which
will result from application of new rates.

Federated Service Ins. Co.

Name of Company

Greg Bangs, ACAS, MAAA – Assoc. Actuary

Official – Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2014

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u>	<u>3,225,977</u>	<u>2.7%</u>
	<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

We are filing to adopt the 1/1/2014 NCCI loss costs and to change our current loss cost multiplier from 1.703 to 1.857.

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Florists' Mutual Insurance
Company

Name of Company

Danielle Ankrom, Compliance
Specialist

Official - Title

ILLINOIS SUMMARY SHEET FORM RF-3

Change in Company's premium or rate level produced by rate revision effective January 1, 2014

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	8,010,684	-2.1
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

Brief description of filing (if filing follows rates of an advisory organization, specify organization) Filing for adoption of NCCI Advisory Rates approved under NCCI Circular IL-2013-06 with deviation, to be effective January 1, 2014.

Revision of Miscellaneous Values - Premium Determination for Partners and Sole Proprietors.

* Adjusted to reflect all prior rate changes.

** change in Company's premium level which will result from application of new rates.

Great West Casualty Company

Name of Company

Janice L. Hohenstein, CPCU

Actuarial Analyst

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective HDI-Gerling America Insurance Company.

	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois) *	Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	\$23,772	-5.8%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): Adoption of NCCI's Workers Compensation Loss Costs

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

HDI-Gerling America Insurance Company

Name of Company

Kevin Purcell - Vice President IRC, LLC

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

 Change in Company's premium or rate level produced by rate revision effective 1/1/2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	242,113	-3.1%
Line of Insurance		

 Does filing only apply to certain territory (territories) or certain classes? If so, specify: no

 Brief description of filing. (If filing follows rates of an advisory organization, specify organization): NCCI loss costs adoption filing.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Imperium Insurance Company

Name of Company

Kirby Hill, President

Official – Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 03/1/2014.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 224,589,322	-4.1%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify No

Brief description of filing (if filing follows rates of an advisory organization, specify organization) See Filing Memorandum:
(Adopt 1/1/14 Advisory Rates)

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

INDEMNITY INSURANCE COMPANY of N. AMERICA
Name of Company

John Fogleboch – WC Compliance Analyst
Official — Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective January 1, 2014.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	2,822,826	-4.1%

Line of Insurance

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Adoption of NCCI's Pure Premiums effective 1/1/2014. We are
adopting a revised multiplier of 1.922. The implied rate change from 1/1/13 rates to 1/1/14 rates is -4.1%.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Lumbermen's Underwriting Alliance

Name of Company

Donna Bauman-Gov't Affairs Senior Analyst

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate-level produced by rate revision effective 1/1/2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u> Line of Insurance	633,992	-0.3%

Does filing only apply to certain territory (territories) or certain classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adoption of NCCI
Advisory Loss Costs for IL effective 1/1/2014, as detailed in Circular No. IL-2013-03. We are maintaining our filed LCM of
1.88.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Markel Insurance Company

Name of Company

Lynn DeMoura - Regulatory Compliance Supervisor

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective January 1, 2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u> Line of Insurance	\$438,183	-1.972

Does filing only apply to certain territory (territories) or certain classes? If so, specify: This is a reference filing. We are adopting the change made by NCCI in Circular IL-2013-06. The rate decrease shown above is the overall rate impact for our own book of business.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Adopting NCCI's 1/1/14 voluntary rates. Our only deviation is unchanged from all prior rate filings - our maximum minimum premium is filed at \$750 instead of NCCI's \$1,000. Please see the attached manual exception page which reflects this deviation and shows the premium algorithm we filed for years 2006-2013. We have also attached our existing schedule rating plan without any changes for your reference. We are also updating our large deductible credit factors to reflect NCCI's current excess loss and allocated expense factors and current company expenses.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

MEMIC Indemnity Company
Name of Company

Jeannine Reuillard, Sr Compliance Analyst
Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective January 1, 2014

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2.	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	179,185	-5.8%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization): _____
Adopting NCCI loss cost filing effective January 1, 2014

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Midwest Builders' Casualty Mutual Company

Name of Company

Rose Kasper - Compliance Officer

Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 01/01/2014.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$5,397,864	0.0%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify _____

No _____

Brief description of filing (if filing follows rates of an advisory organization, specify organization) _____

Adoption of NCCI Workers Compensation Loss Cost Reference Filing Number IL-2013-03 effective 01/01/2014. _____

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

National Interstate Insurance Company
Name of CompanyKathy Juhasz, Regulatory Compliance Spec.
Official — Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective January 1, 2014

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other 16.0 - Workers Compensation	\$1,693,631	-4.00%
Line of Insurance		

Does Filing only apply to certain territory (territories) or certain
classes? If so, specify: No

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization):

Adoption of NCCI's Workers Compensation Loss Costs
and company LCM revision

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Nova Casualty Company

Name of Company

Kevin Purcell, Vice President - IRC

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	30612	-5.8%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory

Organization, specify

organization):

Oak River Insurance Company is adopting

the loss costs and miscellaneous values promulgated by NCCI and approved by the Illinois Department of
Insurance for policies incepting after 01/01/2014.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Oak River Insurance Company

Name of Company

Keith Engelbrecht, A.C.A.S. - Actuary

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective January 1, 2014.

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>10,026,482</u>	<u>-5.8</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: n/a

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Old Republic Insurance Company
Adoption of NCCI IL-2013-03 Advisory Rates,
Loss Costs, and Rating Values

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Old Republic Insurance Company

Name of Company

Deborah J. Matthews - Manager - Regulatory Compliance

Official - Title

SUMMARY SHEET

Change in Company's premium or rate level produced by rate
revision effective January 1, 2014.

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers Compensation</u>	<u>19,214,607</u>	<u>-5.8</u>
<u>Line of Insurance</u>		

Does filing only apply to certain territory (territories) or certain classes?
If so, specify: n/a

Brief description of filing. (If filing follows rates of an advisory
organization, specify organization): Old Republic General Insurance Corporation
Adoption of NCCI IL-2013-03 Advisory Rates,
Loss Costs, and Rating Values

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will
result from application of new rates.

Old Republic General Insurance Corporation
Name of Company

Deborah J. Matthews, AVP - Compliance
Official - Title

ILLINOIS SUMMARY SHEET

FORM RF-3

Change in Company's premium or rate level produced by rate revision effective 03/1/2014.

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Workers Compensation	\$ 754,247	-4.1%
16. Other _____		
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify NoBrief description of filing (if filing follows rates of an advisory organization, specify organization) See Filing Memorandum:
(Adopt 1/1/14 Advisory Rates)

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

PACIFIC EMPLOYERS INSURANCE COMPANY
Name of CompanyJohn Fogleboch – WC Compliance Analyst
Official — Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)**FORM (RF-3)****SUMMARY SHEET**

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers' Compensation</u>	<u>\$8,114,397</u>	<u>2.79%</u>

Line of Insurance

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: _____

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Protective Insurance is a member of NCCI. As such, we wish to
adopt the approved advisory rates, rating values and item filings referenced in NCCI circular IL-2013-06 without
change.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Protective Insurance Company

Name of Company

Renee Smith - Compliance Analyst

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014 (new and renewal).

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	12/001	-4.5%
	Life of Insurance	12,001	

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: No-Applies to all WC Classes

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization): _____

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Riverport Insurance Company

Name of Company

Sharon Coyne - Regulatory Analyst

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 01/01/2014

(1) Coverage		(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers Compensation	5,424,830	(3.27%)
Line of Insurance			

Does filing only apply to certain territory (territories) or certain Classes? If so, specify: _____

Brief description of filing. (If filing follows rates of an advisory Organization, specify organization):

Adoption without deviation of NCCI Voluntary Advisory Rates

effective 01/01/2014.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Rockwood Casualty Insurance Company

Name of Company

Andra M. Snyder - Regulatory Compliance Officer

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective 1-1-2014.

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damag Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Workers' Compensation	\$76,447	-5.9%
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

This follows the 1-1-2014 loss cost filing on our behalf by NCCI.

Please refer to the NCCI circular IL-2013-03.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

SFM Mutual Insurance Company

Name of Company

Brian R. Bent, VP & Director of Underwriting

Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision
effective January 1, 2014

	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2.	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other 16.0 - Workers Compensation	\$5,268,831	-5.80%
	Life of Insurance		

Does filing only apply to certain territory (territories) or certain
Classes? If so,
specify: No

Brief description of filing. (If filing follows rates of an advisory

Organization, specify
organization):

Workers Compensation Adoption Filing of NCCI 1/1/14 Loss Costs.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new
rates.

Starr Indemnity & Liability Company

Name of Company

Krystal A. Ross, ACAS, MAAA - Assistant Actuary

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 3/1/2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability		
Private Passenger		
Commercial		
2. Automobile Physical Damage		
Private Passenger		
Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	\$8,778,165	-6.70%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: Yes, we are adding class 8742
to the surcharged list of Loss Cost Multipliers.

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): We are adopting
the NCCI loss costs IL-2013-03 effective March 1, 2014, and revising our Loss Cost Multipliers.

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

United Fire & Casualty

Name of Company

Allen R. Sorensen, VP - Corporate Underwriting

Official - Title

SUMMARY SHEETChange in Company's Premium or rate level produced by rate revision effective 3/1/2014

	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other <u>Workers Compensation</u>	29,584,614	-6.3%
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

No

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

March 1, 2014 adoption of 2014 Illinois Workers Compensation rates from NCCI approved by Illinois Department of Insurance

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

West Bend Mutual Insurance Company
Name of CompanyStephen J. Mueller, CPCU - Product Development Specialist
Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2014

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	5,480,747	-6.5%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

Adoption of NCCI advisory loss costs and rating values effective January 1, 2014

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Zurich American Insurance Company of Illinois

Name of Company

Gary E. Shook, Vice President and Chief Pricing Actuary

Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 1/1/2014

(1) <u>Coverage</u>	(2) <u>Annual Premium Volume (Illinois)*</u>	(3) <u>Percent Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial		
2. Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto		
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other <u>Workers' Compensation</u>	42,126,731	-7.3%
Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory organization, specify organization): _____

Adoption of NCCI advisory loss costs and rating values effective January 1, 2014

*Adjusted to reflect all prior rate changes.

**Change in Company's premium level which will result from application of new rates.

Zurich American Insurance Company

Name of Company

Gary E. Shook, Vice President and Chief Pricing Actuary

Official – Title